

# Penguin Aquatics Tryout Form

To schedule a tryout, please contact Coach Jane at (206) 291-6399 or coachjane@penguinaquatics.com.

Please fill out this form and bring with you to the tryout.

## Swimmer Information

Swimmer's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: M / F

Parents'/Guardians' Names: \_\_\_\_\_

Address: \_\_\_\_\_

Email Addresses: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Previous Swimming Experience: \_\_\_\_\_

Summer League: Y / N Team: \_\_\_\_\_

USA Swimming: Y / N Team: \_\_\_\_\_

If previous competition experience, please provide best times, if known. A copy of your swimmer's best times is also sufficient.

Free: 25 \_\_\_\_\_ 50 \_\_\_\_\_ 100 \_\_\_\_\_ 200 \_\_\_\_\_ 500 \_\_\_\_\_

Back: 25 \_\_\_\_\_ 50 \_\_\_\_\_ 100 \_\_\_\_\_

Breast: 25 \_\_\_\_\_ 50 \_\_\_\_\_ 100 \_\_\_\_\_

Fly: 25 \_\_\_\_\_ 50 \_\_\_\_\_ 100 \_\_\_\_\_

IM: 100 \_\_\_\_\_ 200 \_\_\_\_\_

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For Coach Use Only